

**Northwest Community EMS System  
PBPI Meeting Minutes  
Wednesday, November 3, 2021**

| Topic                                  | Discussion   | Actions/Follow-Up |
|--|--|-------------------|
| <b>Call to Order</b>                   | Meeting called to order at 0901 hours.   |                   |
| <b>New Members &amp; Guests</b>        | None.  |                   |
| <b>Minutes &amp; Agenda</b>            | Motion to approve October minutes with a spelling change to “subdue(d)” made by Markus, second by Adam. All in favor, motion granted, minutes approved. No additions to agenda.  |                   |
| <b>Old Business<br/>Ketamine Query</b> | Data collected from Jan 1, 2020 – June 30, 2021. 18 months. 359 incidents where it was used. Total of 433 doses given. Documentation issues – specifically dosing issues; some documented as mL, some as micrograms, etc. Need further education on that. Used to manage airway 35 times. Excited Delirium, 148 times. Pain, 177 times. Sedation, 9 times. Most used route was IM with 48.8%, IV was second at 37.6%, with IN and IO both under 10%. For pain, we overdosed 93 times (based on estimated weight), underdosed 89 times, and were exact on the dose 12 times. For sedation we overdosed 9 times, underdosed 4 times and had exact dose was 0. Some more analysis regarding when SpO <sub>2</sub> and EtCO <sub>2</sub> were used. Some discussion followed, specific to dosing. It was noted that (for sedation/psychiatric patients), if the desired result (sedation) is achieved with a lower dose, the PMs hold off on giving more medication. Dr. Jordan said he’s OK with underdosing for excited delirium. When he’s using it, he shoots for 300mg, which tends to be a good amount for most adults, and it’s easy to dose because it is 2 separate 3mL injections. |                   |
| <b>New Business</b>                    | <p><b>Pediatric cardiac arrest</b> - Jason presented the data points he plans on collecting for this screen. Looking for feedback on if there are any other items we’d like to see in the screen. Suggested to add primary and secondary impression so we might know an underlying cause. Also, add what was their initial presenting rhythm and how often they documented what the rhythm was throughout call. Another suggestion was to look at what joules we are using on any cases we are defibrillating. Lastly, we want to look at if amiodarone was given on a shockable rhythm. Also look at any additional meds that might have been given (i.e. Norepi)</p> <p><b>December Elections</b> – elections for chair and vice chair. Voting will be in December for those actually at the meeting. Jason has been nominated for chair by Markus. Ryan Nominated for vice chair by Markus.</p> <p><b>December screen</b> - If there is nothing pressing, Jason would like to take the month off. All members in favor of taking the month off.</p>   |                   |
| <b>CARS Update</b>                     | No update from CARS this month.  |                   |
| <b>Cardiac Arrest Comm</b>             | Scrubbing recent data. Will update when results are ready.   |                   |
| <b>System Updates</b>                  | Ketamine controversy is continuing in light of the lawsuits in Colorado and Georgia. Overdosing and lack of monitoring are of concern and issues that need to be addressed. Paramedic students are still in class. Preceptor classes to be held in February; Field internships start in early March 2022.  |                   |
| <b>Closing remarks</b>                 | None.  |                   |
| <b>Adjournment</b>                     | Next meeting December 1, 2021 – motion to adjourn by Susan, second by Markus. Meeting adjourned at 0949. Minutes respectfully submitted by: Nichole Junge, RN, PM  |                   |